

AMENDMENT TRANSMITTAL LETTER			Docket No. 1630-0514PUS1																																											
Application No.	Filing Date Concurrently Herewith	Examiner M. Le	Art Unit 2163																																											
Applicant(s): Young-Chul KIM																																														
Invention: APPARATUS AND METHOD FOR AN ADDITIONAL CONTENTS DISPLAY OF AN OPTICAL DISC PLAYER																																														
<p>MS AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</p> <p>Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <th colspan="6" style="text-align: center;">CLAIMS AS AMENDED</th> </tr> <tr> <th></th> <th style="text-align: center;">Claims Remaining After Amendment</th> <th style="text-align: center;">Highest Number Previously Paid</th> <th style="text-align: center;">Number Extra Claims Present</th> <th style="text-align: center;">Rate</th> <th></th> </tr> <tr> <td>Total Claims</td> <td style="text-align: center;">23</td> <td style="text-align: center;">- 34 =</td> <td style="text-align: center;">0</td> <td style="text-align: center;">x 52.00</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td>Independent Claims</td> <td style="text-align: center;">8</td> <td style="text-align: center;">- 10 =</td> <td style="text-align: center;">0</td> <td style="text-align: center;">x 220.00</td> <td style="text-align: center;">0.00</td> </tr> <tr> <td colspan="5">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="5">Other fee (please specify):</td> <td></td> </tr> <tr> <td colspan="5">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</td> <td style="text-align: center;">0.00</td> </tr> </table> <p style="margin-top: 10px;"> <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity </p> <p> <input checked="" type="checkbox"/> No additional fee is required for this amendment. </p> <p> <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed. </p> <p> <input type="checkbox"/> A check in the amount of \$ _____ is enclosed. </p> <p> <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. </p> <p> <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed. </p> <p style="margin-left: 40px;"> <input checked="" type="checkbox"/> Credit any overpayment. </p> <p style="margin-left: 40px;"> <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. </p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> David A. Bilodeau Attorney Reg. No.: 42,325 </div> <div style="text-align: right;"> Dated: <u>April 30, 2009</u> </div> </div> <p style="margin-top: 20px;"> BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000 </p>					CLAIMS AS AMENDED							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	23	- 34 =	0	x 52.00	0.00	Independent Claims	8	- 10 =	0	x 220.00	0.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify):						TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
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